

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------|-----------------|-----------------|
| FEE DETERMINATION | <i>David</i> | | 07-12-01 |
| I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>T.A.</i> | <i>J.C. 844</i> | <i>08/05/01</i> |
| RESPONSE FORMALITY REVIEW | <i>f.s.</i> | <i>866</i> | <i>11-13-01</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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205
03/09
-52-521
11/14/01